| | oe in this Sax | San | | | Carlo III Maria | |
|--|---------------------------|---|---|---|--|------------------------------------|
| Fill in this information | on to identify yo | ur case and th | is filing: | | | |
| | Ruica Lesley T | homas-Gillia Middle | | Last Name | | |
| Debtor 2 (Spouse, if filing) | irst Name | Middle | Name | Last Name | | |
| United States Bankru | ptcy Court for the | : MIDDLE DI | STRICT OF PENNSY | 'LVANIA | | |
| Case number 5:22 | 2-bk-01535 | | | - | | Check if this is an amended filing |
| | | | | | | g |
| Official Form | 106A/B | | | | | |
| Schedule A | A/B: Pro | perty-T | o Correct | Value of Re | al Estate pe | er Appraisal |
| dated 10/2 | 8/2022 | | | | 12/15 | |
| think it fits best. Be as | complete and acc | urate as possible | . If two married people | n asset fits in more than or are filing together, both ar top of any additional page | e equally responsible for | supplying correct |
| Part 1: Describe Each | Residence, Build | ing, Land, or Oth | er Real Estate You Ow | n or Have an Interest In | | |
| 1. Do you own or have | any legal or equita | ble interest in an | ny residence, building, | land, or similar property? | | |
| No. Go to Part 2. ✓ Yes. Where is the | property? | | | | | |
| y res. Where is the | property? | | | | | |
| 5432 Ridgefie Street address, if avai Tobyhanna City Monroe County | lable, or other descripti | 8 466-0000 ZIP Code | Land Investment pro Timeshare Other Who has an interest Debtor 1 only Debtor 2 only Debtor 1 and D At least one of Other information yo property identification | ome i-unit building or cooperative or mobile home perty in the property? Check one rebtor 2 only the debtors and another u wish to add about this ite | the amount of any secu Creditors Who Have Classifications who Have Classifications who have Classifications who have Classifications as fee simple, to a life estate), if known Check if this is considered the constructions of the construction of the constructi | |
| | attached for Par | | | om Part 1, including an | | \$167,000.00 |
| | | | | hether they are register ecutory Contracts and Un | | vehicles you own that |
| 3. Cars, vans, trucks | | | | • | | |
| ✓ No ☐ Yes | | | | | | |
| Official Form 106A/B | | | Schedule A/B: I | Property | | page 1 |

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page 1

Case 5:22-bk-01535-MJC Doc 40 Filed 11/25/22 Entered 11/25/22 10:34:32 Desc Main Document Page 2 of 13 page 2

Schedule A/B: Property

Official Form 106A/B

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own? Do not deduct secured claims or exemptions.

| 16 | Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ No ☐ Yes |
|-----|---|
| 17. | Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. |
| | ✓ No ☐ Yes |
| 18. | Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts V No |
| | Yes Institution or issuer name: |
| 19. | Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture |
| | ✓ No ☐ Yes. Give specific information about them |
| | Name of entity: % of ownership: |
| 20. | Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. |
| | Yes. Give specific information about them |
| | Issuer name: |
| | Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans V No |
| | Yes. List each account separately. Type of account: Institution name: |
| | Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others |
| | ▼ No Yes Institution name or individual: |
| | Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) |
| | ▼ No |
| | Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ✓ No |
| | Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): |
| | Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ✓ No ✓ Yes. Give specific information about them |
| 20 | |
| | Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ✓ No |
| | Yes. Give specific information about them |
| | Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ✓ No |
| | Yes. Give specific information about them |

Official Form 106A/B

Schedule A/B: Property

page 3

Desc

| Debtor 1 | Ruica Lesley Thomas-Gilliam | Case number (if known) | 5:22-bk-01535 |
|------------------------------|--|--------------------------------|---|
| Money or | property owed to you? | | Current value of the portion you own? Do not deduct secured |
| √ No | funds owed to you Give specific information about them, including whether you already filed the return | s and the tax years | claims or exemptions. |
| √ No | support oles: Past due or lump sum alimony, spousal support, child support, maintenance, d Give specific information | ivorce settlement, property | settlement |
| <i>Exam</i> µ ☑ No | amounts someone owes you oles: Unpaid wages, disability insurance payments, disability benefits, sick pay, vaca benefits; unpaid loans you made to someone else Give specific information | ation pay, workers' comper | sation, Social Security |
| | ts in insurance policies oles: Health, disability, or life insurance; health savings account (HSA); credit, home | owner's, or renter's insuran | се |
| | Name the insurance company of each policy and list its value. Company name: Benefi | iciary: | Surrender or refund value: |
| If you a someo ✓ No | terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy, or a ne has died. Give specific information | are currently entitled to rece | ive property because |
| <i>Examp</i> √ No | against third parties, whether or not you have filed a lawsuit or made a demainles: Accidents, employment disputes, insurance claims, or rights to sue Describe each claim | nd for payment | |
| ✓ No | contingent and unliquidated claims of every nature, including counterclaims on Describe each claim | f the debtor and rights to | set off claims |
| V No | ancial assets you did not already list Give specific information | | |
| | he dollar value of all of your entries from Part 4, including any entries for page art 4. Write that number here | | \$0.00 |
| Part 5: Des | scribe Any Business-Related Property You Own or Have an Interest In. List any real estat | e in Part 1. | |
| ▼ No. Go | own or have any legal or equitable interest in any business-related property? to Part 6. to to line 38. | | |
| | scribe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest ou own or have an interest in farmland, list it in Part 1. | In. | - |
| ✓ No. | own or have any legal or equitable interest in any farm- or commercial fishing Go to Part 7. . Go to line 47. | g-related property? | |

Official Form 106A/B

Schedule A/B: Property

page 4

| Deb | otor 1 Ruica L | esley Thomas-Gilliam | | Case number (if known) | 5:22-bk-01535 |
|------|--------------------------------|--|-----------------------|--|----------------|
| Part | 7: Describe | All Property You Own or Have an Interest in That Y | ou Did Not List Above | 5. July 10. 45 44 - 12. July 10. 10. 40. 10. | - 18 - 10 - 14 |
| _ | <i>Examples:</i> Seaso ☑ No | er property of any kind you did not already lis n tickets, country club membership fic information | et? | | |
| 54. | Add the dollar v | alue of all of your entries from Part 7. Write t | hat number here | | \$0.00 |
| Part | 8: List the Tot | als of Each Part of this Form | | | |
| 55. | Part 1: Total rea | l estate, line 2 | | | \$167,000.00 |
| 56. | Part 2: Total veh | icles, line 5 | \$0.00 | | |
| 57. | Part 3: Total per | sonal and household items, line 15 | \$0.00 | | |
| 58. | Part 4: Total fina | ancial assets, line 36 | \$0.00 | | |
| 59. | Part 5: Total bus | siness-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total fare | m- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total oth | er property not listed, line 54 | + \$0.00 | | |
| 62. | Total personal p | roperty. Add lines 56 through 61 | \$0.00 | Copy personal property to | stal \$0.00 |
| 63. | Total of all prop | erty on Schedule A/B. Add line 55 + line 62 | | | \$167,000.00 |

| Check if this is an amended filing |
|---------------------------------------|
| |

Official Form 106C

Schedule C: The Property You Claim as Exempt-Add Exemption of Real Property

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | rt 1: Identify the Property You Claim as E | Exempt | | | |
|----|---|--|---------|--|------------------------------------|
| | Which set of exemptions are you claiming ☐ You are claiming state and federal nonbar ✓ You are claiming federal exemptions. 11 | nkruptcy exemptions. U.S.C. § 522(b)(2) | 11 U.: | S.C. § 522(b)(3) | |
| 2. | For any property you list on Schedule A/B Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Am | fill in the information below. ount of the exemption you claim ck only one box for each exemption. | Specific laws that allow exemption |
| | 5432 Ridgefield Drive Tobyhanna, PA 18466 Monroe County value based on appraisal dated 10/18/22 Line from <i>Schedule A/B</i> : 1.1 | \$167,000.00 | | \$15,901.90 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(1) |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/25 and every 2 No Yes. Did you acquire the property covered No Yes | 3 years after that for ca | ises fi | The second secon | 1990. . |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

| Fill in this information to identify yo | III Case. | | | |
|---|---|--|---|--------------------------------|
| the same less than the same same same same same same same sam | | | | |
| Debtor 1 Ruica Lesley T | | | | |
| | Middle Name Last Name | | | |
| Debtor 2 (Spouse if, filing) First Name | Middle Name Last Name | The state of the s | •] | |
| United States Bankruptcy Court for the | E: MIDDLE DISTRICT OF PENNSYLVANIA | | | |
| Case number 5:22-bk-01535 | | | | |
| (if known) | | | | if this is an |
| | | | amend | led filing |
| Official Form 106D | | | | |
| Schedule D: Creditors | s Who Have Claims Secure | d by Propert | y-Correct An | nount of |
| | ono Country Place & Valu | | | 12/15 |
| | | |) | |
| s needed, copy the Additional Page, fill it | If two married people are filing together, both are eout, number the entries, and attach it to this form. | On the top of any addition | nal pages, write your na | me and case |
| number (if known). | | | | |
| Do any creditors have claims secured to | | Vau hava sething alea t | e ranget on this form | |
| Yes. Fill in all of the information | this form to the court with your other schedules. | You have nothing else t | o report on this form. | |
| Part 1: List All Secured Claims | below. | | | |
| | (I | Column A | Column B | Column C |
| | more than one secured claim, list the creditor separate s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name. | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 A Pocono Country Place | Describe the argument that accourse the claims | \$34,766.29 | \$167,000.00 | \$0.00 |
| POA Creditor's Name | Describe the property that secures the claim: 5432 Ridgefield Drive Tobyhanna, | \$34,700.23 | \$107,000.00 | - 40.00 |
| | PA 18466 | | | |
| | As of the date you file, the claim is: Check all that | | | |
| 112 Recreation Drive | apply. | | | |
| Tobyhanna, PA 18466 Number, Street, City, State & Zip Code | Contingent Unliquidated | | | |
| | Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | An agreement you made (such as mortgage or so car loan) | ecured | | |
| Debtor 2 only Debtor 1 and Debtor 2 only | Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and another | Judgment lien from a lawsuit | | | |
| Check if this claim relates to a | Other (including a right to offset) Association | on Dues | | |
| community debt | | | | |
| Date debt was incurred | Last 4 digits of account number 5242 | Superior Constitution Constitution Constitution | 138 (married 17 July 18 July | |
| 2.2 Bank of America, N.A. | Describe the property that secures the claim: | \$91,381.81 | \$167,000.00 | \$0.00 |
| Creditor's Name | 5432 Ridgefield Drive Tobyhanna, | 401,001.01 | \$101,000.00 | |
| | PA 18466 | | | |
| 4909 Savarese Circle | As of the date you file, the claim is: Check all that | | | |
| 1-908-01-47 | apply. | | | |
| Tampa, FL 33634 Number, Street, City, State & Zip Code | Contingent | | | |
| Number, Street, Oily, State & Zip Code | Unliquidated Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | An agreement you made (such as mortgage or se | ecured | | |
| Debtor 2 only | car loan) | | | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit | | | |
| Check if this claim relates to a | Other (including a right to offset) Mortgage | | | |
| community debt | | | | |
| Date debt was incurred 01/02 | Last 4 digits of account number 7684 | | | |
| | 1001 | | | |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

| Debtor 1 Ruica Lesley Thomas-G | illiam | Case number (if known) | 5:22-bk-01535 | |
|--|--|----------------------------------|-------------------------------|----------|
| First Name Middle Na | me Last Name | | 2 | |
| 2.3 Redevelopment Auth. of | Describe the property that secures the claim: | \$24,950.00 | \$167,000.00 | \$0.00 |
| Creditor's Name 15 South Courtland Street East Stroudsburg, PA 18301-2825 Number, Street, City, State & Zip Code | 5432 Ridgefield Drive Tobyhanna, PA 18466 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | | | |
| Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred 1/30/2014 | Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or scar loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☑ Other (including a right to offset) ☐ Last 4 digits of account number | | | |
| Add the dollar value of your entries in Co If this is the last page of your form, add t Write that number here: | | \$151,098. \$151,098. | | |
| trying to collect from you for a debt you ov | e notified about your bankruptcy for a debt that your to someone else, list the creditor in Part 1, and you listed in Part 1, list the additional creditors he spage. | I then list the collection ager | ncy here. Similarly, if you h | ave more |
| Name, Number, Street, City, State & Nicholas Charles Haros, Es 802 Main Street Stroudsburg, PA 18360 | sq. | hich line in Part 1 did you ente | er the creditor? 2.1 | |

| | I in this information to identify your | | | | | | | | |
|--------------|---|--|----------------------------|----------|-------------|------------------------|--------------|----------------------------------|---------|
| De | ebtor 1 Ruica Leslo | ey Thomas-Gilliam | | | - | | | | |
| 100000 | ebtor 2 pouse, if filing) | | | | - | | | | |
| Un | nited States Bankruptcy Court for th | e: MIDDLE DISTRICT C | OF PENNSYLVANIA | | _ | | | | |
| 2000 | 5:22-bk-01535 | | | | (| Check if this is: | | | |
| (If k | (nown) | | | | 1 | An amende | d filing | | |
| _ | | | | | [| A supplement 13 income | | g postpetition Illowing date: | chapter |
| 0 | fficial Form 106l | | | | | MM / DD/ Y | YYY | | |
| S | chedule I: Your Inc | ome | | | | | | | 12/15 |
| spo atta | oplying correct information. If you buse. If you are separated and you ach a separate sheet to this form. | ur spouse is not filing wi On the top of any additi | ith you, do not include | infor | mation a | bout your spo | use. If mo | re space is r | needed. |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor 2 | or non-fil | ing spouse | |
| | If you have more than one job, | Accepted for the second | ☐ Employed | | | ☐ Emplo | yed | | |
| | attach a separate page with information about additional | Employment status | ■ Not employed | | | ☐ Not er | mployed | | |
| | employers. | Occupation | | | | _ | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | - | | | _ | | | 125 |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | | | | | | |
| | | How long employed th | here? | | | | | | |
| Par | rt 2: Give Details About Mo | nthly Income | | | | | | | |
| Esti spou | imate monthly income as of the dust unless you are separated. | late you file this form. If y | you have nothing to rep | ort for | any line, v | write \$0 in the | space. Incl | lude your non | -filing |
| f yo | ou or your non-filing spouse have m e space, attach a separate sheet to | ore than one employer, co this form. | ombine the information for | or all e | employers | for that perso | n on the lin | es below. If y | ou need |
| | | | | | For | Debtor 1 | For Deb | tor 2 or ig spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 0.00 | \$ | N/A | |
| 3. | Estimate and list monthly over | time pay. | | 3. | +\$ | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Income. Add li | ne 2 + line 3. | | 4. | \$ | 0.00 | \$ | N/A | |
| | | | | | | | | | |

| Deb | tor 1 | Ruica Lesley Thomas-Gilliam | _ | Case number (if known) | 5:22-bk-01535 |
|-----|--|---|---|---|--|
| | Cop | by line 4 here | 4. | For Debtor 1 \$ 0.00 | For Debtor 2 or non-filing spouse \$ N/A |
| 5. | List | all payroll deductions: | | | |
| | 5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h. | Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify: | 5a. 5b. 5c. 5d. 5e. 5f. 5g. | \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 | \$ N/A \$ N/A \$ N/A \$ N/A \$ N/A \$ N/A \$ N/A |
| 6. | | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | — 6. | \$ 0.00 | \$ N/A |
| 7. | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ 0.00 | \$ N/A |
| 8. | | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ 0.00 | \$ N/A |
| | 8b. | Interest and dividends | 8b. | \$ 0.00 | \$ N/A |
| | 8c. 8d. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation | 8c. 8d. | \$ 0.00 \$ 0.00 | \$ |
| | 8e. | Social Security | 8e. | \$ 1,198.10 | \$ N/A |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | \$ 0.00 | \$ N/A |
| | 8g. | Pension or retirement income | - 8g. | \$ 0.00 | \$ N/A |
| | 8h. | average 1099 income from Silver Other monthly income. Specify: Sneakers | 8h.+ | s 346.67 | · · · · · · · · · · · · · · · · · · · |
| | | Rent paid by adult son | _ ''' | \$ 800.00 | \$ N/A |
| | | Rent paid by tenant | _ | \$ 950.00 | \$ N/A |
| | | Food stamps | | \$ 600.00 | \$ N/A |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$3,894.77 | \$N/A |
| 10. | | ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$_ | 3,894.77 + \$ | N/A = \$3,894.77 |
| 11. | Inclu other | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your rifiends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a cify: | depend | | 9 1950900 |
| 12. | Add Write appli | the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certaines | ult is the n <i>Liabili</i> | e combined monthly in ties and Related <i>Data</i> | come. , if it 12. \$ 3,894.77 Combined monthly income |
| 13. | Do y | ou expect an increase or decrease within the year after you file this form? No. | ? | | monary moone |
| | | Yes. Explain: | | | |
| | | | | | |

| Fill | in this informa | tion to identify y | our case: | | | | | * |
|------------|----------------------------------|------------------------------------|--------------------------|--|--|-----------|---|-------------------------------|
| | btor 1 | Ruica Lesley | | s-Gilliam | | CI | neck if this is: | |
| | | 114104 20010 | momac | - Cilliani | | | An amended fil | ing |
| 2337 | btor 2 | | | | | | | showing postpetition chapter |
| (Sp | ouse, if filing) | | | | | | 13 expenses as | s of the following date: |
| Uni | ted States Bankri | uptcy Court for the | : MIDDLE | DISTRICT OF PENNSY | LVANIA | | MM / DD / YYY | Υ |
| | and the second second | 22-bk-01535 | | | | | | |
| (If k | (nown) | | | | | | | |
| 0 | fficial Fo | rm 106.I | | | | | | |
| | | J: Your | Exper | ises | | | | 12/15 |
| Be info | as complete a ormation. If me | ind accurate as | possible. eded, atta | If two married people ar ch another sheet to this | re filing together, bot form. On the top of a | h are ed | qually responsibl itional pages, wri | e for supplying correct |
| Par | | be Your House | hold | | | | | |
| 1. | ls this a join | | | | | | | |
| | ■ No. Go to | line 2. Debtor 2 live i | in a conar | eto household? | | | | |
| | □ res. Does | | ii a Sepaia | ate nousehold? | | | | |
| | | | t file Officia | al Form 106J-2, <i>Expenses</i> | for Separate Househ | old of De | ebtor 2. | |
| 2. | Do you have | dependents? | □ No | | | | | |
| | Do not list De Debtor 2. | btor 1 and | Yes. | Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor 2 | | Dependent's age | live with you? |
| | Do not state t | he | | | Son - Disabled, | no | | □ No |
| | dependents n | ames. | | | income | | 21 | ■ Yes |
| | | | | | | | | □ No |
| | | | | | | | | Pyes |
| | | | | | | | | □ No |
| | | | | | | | | □ Yes □ No |
| | | | | | | | | □ No □ Yes |
| 3. | Do your expe | enses include | | N _a | | | | _ Li fes |
| | expenses of | people other th your depender | nan _ | No Yes | | | | |
| | t 2: Estima | te Your Ongoir | ig Monthly our bankru | Expenses | ou are using this for | m as a s | supplement in a (| Chapter 13 case to report |
| exp | enses as of a licable date. | date after the b | ankruptcy | is filed. If this is a supp | lemental <i>Schedule J</i> | , check | the box at the to | p of the form and fill in the |
| | | | | overnment assistance if | | | | |
| | value of such ficial Form 106 | | I have incl | uded it on Schedule I: Y | our Income | | Youre | xpenses |
| 4. | | home ownersh I any rent for the | | ses for your residence. In lot. | nclude first mortgage | 4. | \$ | 551.00 |
| | If not include | ed in line 4: | | | | | | |
| | 4a. Real es | tate taxes | | | | 4a. | \$ | 0.00 |
| | 4b. Propert | y, homeowner's | , or renter's | sinsurance | | 4b. | \$ | 0.00 |
| | | naintenance, rep | | | | 4c. | - 100 to | 0.00 |
| 5. | | wner's association | | ominium dues ur residence, such as hor | no oquit. Issa | 4d. 5. | \$ s | 116.67 |
| J. | Augunonai M | urtuaue pavme | IIIS FOR VOL | ar residence, such as non | ne equity loans | | -D | 0.00 |

Official Form 106J

Schedule J: Your Expenses

| Debte | Ruica Lesley Thomas-Gilliam | Case nur | nber (if known) | 5:22-bk-01535 |
|-------|--|--------------|-------------------|------------------------------|
| 6. | Utilities: | | | |
| | 6a. Electricity, heat, natural gas | 6a. | \$ | 345.00 |
| | 6b. Water, sewer, garbage collection | 6b. | \$ | 0.00 |
| | Sc. Telephone, cell phone, Internet, satellite, and cable services | | \$ | 165.00 |
| (| 6d. Other. Specify: | 6d. | \$ | 0.00 |
| 7. | Food and housekeeping supplies | | \$ | 855.00 |
| | Childcare and children's education costs | 8. | | 0.00 |
|). (| Clothing, laundry, and dry cleaning | 9. | | 100.00 |
| | Personal care products and services | 10. | ^ 59] | 75.00 |
| | Medical and dental expenses | 11. | | 150.00 |
| | Fransportation. Include gas, maintenance, bus or train fare. | | Ψ | 150.00 |
| | Oo not include car payments. | 12. | \$ | 400.00 |
| | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | . 82 | 100.00 |
| | Charitable contributions and religious donations | 14. | | 0.00 |
| | nsurance. | | - | 0.00 |
| | Do not include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | 5a. Life insurance | 15a. | \$ | 0.00 |
| • | 5b. Health insurance | 15b. | \$ | 0.00 |
| | 5c. Vehicle insurance | 15c. | s | 140.00 |
| - | 5d. Other insurance. Specify: insurance deducted from social security | 15d. | 2.50 | 170.10 |
| 3. 7 | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | · · | 170.10 |
| | Specify: | 16. | \$ | 0.00 |
| | nstallment or lease payments: | | | |
| | 7a. Car payments for Vehicle 1 | 17a. | \$ | 0.00 |
| 1 | 7b. Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| 1 | 7c. Other. Specify: | 17c. | \$ | 0.00 |
| 1 | 7d. Other. Specify: | 17d. | | 0.00 |
| 3. Y | our payments of alimony, maintenance, and support that you did not report a | ns . | 1 | |
| c | leducted from your pay on line 5, Schedule I, Your Income (Official Form 106I) | . 18. | \$ | 0.00 |
|). (| Other payments you make to support others who do not live with you. | | \$ | 0.00 |
| | Specify: | 19. | · · | |
|). C | Other real property expenses not included in lines 4 or 5 of this form or on Sci | | | |
| 2 | Oa. Mortgages on other property | 20a. | \$ | 0.00 |
| 2 | 0b. Real estate taxes | 20b. | \$ | 0.00 |
| 2 | Oc. Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| 2 | 0d. Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| 2 | 0e. Homeowner's association or condominium dues | 20e. | \$ | 0.00 |
| . 0 | Other: Specify: | 21. | +\$ | 0.00 |
| | | - | | |
| | Calculate your monthly expenses | | | |
| | 2a. Add lines 4 through 21. | | \$ | 3,167.77 |
| 2 | 2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| 2 | 2c. Add line 22a and 22b. The result is your monthly expenses. | | \$ | 3,167.77 |
| | alculate your monthly net income. | | | |
| | 3a. Copy line 12 (your combined monthly income) from Schedule I. | 220 | • | 0.004.77 |
| | | 23a. | | 3,894.77 |
| 2 | 3b. Copy your monthly expenses from line 22c above. | 23b. | -\$ | 3,167.77 |
| 2 | 3c. Subtract your monthly expenses from your monthly income. | | | |
| 2 | The result is your monthly net income. | 23c. | \$ | 727.00 |
| | 1993k to your monthly not mounts. | | | |
| 1. D | o you expect an increase or decrease in your expenses within the year after y | ou file this | form? | |
| F | or example, do you expect to finish paying for your car loan within the year or do you expect yo | ur mortgage | payment to increa | ase or decrease because of a |
| m | odification to the terms of your mortgage? | | | |
| | | | | |
| 1 | No. Yes. Explain here: | | <u></u> | |

| Y | | | | <u></u> |
|--|--|----------------------------|---|--------------------------------------|
| Fill in this inform | ation to identify your | case: | | |
| Debtor 1 | Ruica Lesley Thomas-Gilliam | | | |
| Debtor 2 | First Name | Middle Name | Last Name | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA | | | | |
| Case number 5:22-bk-01535 | | | | |
| (if known) | .22-DR-01333 | | | ☐ Check if this is an |
| | | | | amended filing |
| | | | | |
| Official Form | 106Dec | | | |
| Declaration About an Individual Debtor's Schedules 12/15 | | | | |
| | | | | |
| If two married people are filing together, both are equally responsible for supplying correct information. | | | | |
| You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 | | | | |
| years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | |
| | | | | |
| Sign Below | | | | |
| | | | | |
| Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | |
| ■ No | | | | |
| — □ Yes Na | ame of person | | Attach Bar | nkruptcy Petition Preparer's Notice, |
| | Declaration, and Signature (Official Form 119) | | | |
| | | | | |
| | y of perjury, I declare true and correct. | that I have read the summa | ry and schedules filed with this declarat | ion and |
| NA | True and correct. | | | |
| X Ruica I | esley Thomas-Gillia | m | X Signature of Debtor 2 | |
| | of Debtor 1 | | | |
| Date | 11/17/22 | | Date | |
| | 11/1/00 | | | |
| | | | | |
| | | | | |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules